



ATTORNEYS AT LAW

777 EAST WISCONSIN AVENUE  
MILWAUKEE, WI 53202-5306  
TELEPHONE: 414.271.2400  
FACSIMILE: 414.297.4900

WWW.FOLEY.COM

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## FACSIMILE TRANSMISSION

TO: Commissioner for Patents

FROM: Chad E. Bement  
3547

Examiner Kee M. Tung  
Patent Examining Corps  
Facsimile Center  
Washington, D.C. 20231

F&L REF. NO.: 035451-0198 (3350.Palm) (f/k/a 025782-0102)

Total pages, including cover letter: 5

PTO FAX NUMBER (571) 273-8300

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Title of Documents Transmitted: **Notice of Appeal From the Examiner To The Board Of Patent Appeals And Interferences**

Applicants:	<u>Osborn et al.</u>
Appl. No.:	<u>09/726,831</u>
Filing Date:	<u>11/30/2000</u>
Art Unit:	<u>2671</u>
Atty. Dkt. No.:	<u>035451-0198 (3350.Palm) (f/k/a 025782-0102)</u>

By: Chad E. Bement  
Name: Chad E. Bement  
Reg. No.: 54,991

I hereby certify that this paper is being transmitted by facsimile to the U.S. Patent and Trademark Office on the date shown below.

10-03-05  
Date

Roberta A. Cooper  
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Atty. Dkt. No. 035451-0198 (3550.Palm)

***IN THE UNITED STATES PATENT AND TRADEMARK OFFICE***

Applicant: Osborn et al.  
Title: CONTROL OF COLOR DEPTH  
IN A COMPUTING DEVICE  
Appl. No.: 09/726,831  
Filing Date: 11/30/2000  
Examiner: Quillen, Allen E.  
Art Unit: 2676

<b>CERTIFICATE OF FACSIMILE TRANSMISSION</b> I hereby certify that this paper is being facsimile transmitted to the United States Patent and Trademark Office, Alexandria, Virginia on the date below.  <u>Roberta A. Cooper</u> (Printed Name)  <u>Roberta A. Cooper</u> (Signature)  <u>10/03/05</u> (Date of Deposit)
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**NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD  
OF PATENT APPEALS AND INTERFERENCES**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the Examiner in the Final Office Action dated July 1, 2005, and in the Advisory Action dated September 16, 2005, finally rejecting Claims 1-13 and 15-30.

- ☐ Applicant claims small entity status.
- ☐ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:
- ☒ Notice of Appeal Fee
- ☒ To be paid as detailed below
- ☐ Not required (Fee paid in prior appeal)

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Atty. Dkt. No. 035451-0198 (3550.Palm)

The required fees are calculated below:

<input checked="" type="checkbox"/>	Notice of Appeal Fee	\$500.00
<input type="checkbox"/>	Extension month:	\$0.00
<input type="checkbox"/>	Extension:	\$0.00
	FEE TOTAL:	\$500.00
<input type="checkbox"/>	Small Entity Fees Apply (subtract ½ of above):	\$0.00
	TOTAL FEE:	\$500.00

☒ Please charge Deposit Account No. 06-1447 in the amount of \$500.00. A duplicate copy of this transmittal is enclosed.

☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date

10/3/2005

By

Chad E. Bement

FOLEY &amp; LARDNER LLP

Customer Number: 26371

Telephone: (414) 297-5554

Facsimile: (414) 297-4900

Chad E. Bement

Attorney for Applicant

Registration No. 54,991